Notice of Agency Rule-making Proposal

AGENCY: Maine Department of Environmental Protection

RULE TITLE OR SUBJECT: Amendment of Chapter 305, Permit by Rule – Subsection 20: Activities in existing developed areas located in, on or over high or moderate value inland waterfowl and wading bird habitat, or shorebird nesting, feeding, and staging areas

PROPOSED RULE NUMBER: 98-P

CONCISE SUMMARY: These amendments are intended primarily to address two areas.

- (1) Comply with the statutory requirement at 2007, ch. 290(16)(in part) to include provisions in permit by rule (PBR) that (a) incorporate standards for activities consisting solely of cutting or removal of vegetation within shorebird roosting and feeding buffers as specified in statute at 38 M.R.S.A. § 480-CC(2), and (b) provide for an expansion of up to 10% of an existing development area within a shorebird feeding area.
- (2) Provide PBR standards for activities consisting solely of cutting or removal of vegetation to remove a safety hazard or to allow for a footpath within inland waterfowl and wading bird habitat.

The affect of these amendments is to allow additional activities to proceed under a simplified permitting process, Permit by Rule (PBR), rather than an individual, full permit process.

Materials related to this rulemaking, including the text of the laws cited above, will be available through: http://www.maine.gov/dep/blwq/rule.htm

THIS RULE WILL WILL NOT X HAVE A FISCAL IMPACT ON MUNICIPALITIES.

STATUTORY AUTHORITY: 38 M.R.S.A. §§ 341-D(1-B) and 480-CC(2), and PL 2007, ch. 290(16)(in part)

PUBLIC HEARING): November 1, 2007 at 9:00 am. Location: the Holiday Inn/Ground Round, 110 Community Drive, Augusta, Maine 04330

DEADLINE FOR COMMENTS: 5:00 pm, November 12, 2007

Comments may be submitted by mail, e-mail or fax. To ensure the comments are considered, they must include your name and the organization you represent, if any.

The draft rule amendments will be available through: http://www.maine.gov/dep/blwq/rule.htm A hardcopy may also be requested from the contact person below.

AGENCY CONTACT PERSON: Hetty Richardson

AGENCY NAME: Maine Department of Environmental Protection

ADDRESS: 28 Tyson Drive

Augusta, ME 04333-0017

EMAIL: Hetty.L.Richardson@maine.gov

FAX: 207-287-7826 TELEPHONE: 207-287-7799

Please approve bottom portion of this form and assign appropriate MFASIS number.

ACCOUNT CODE: 014 06A 1754 142

APPROVED FOR PAYMENT______ DATE:______

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